



STATE OF MISSOURI  
DIVISION OF PROFESSIONAL REGISTRATION  
MISSOURI REAL ESTATE COMMISSION  
**ENTITY APPLICATION**

**IMPORTANT INFORMATION:** If you plan to form a corporation, partnership, or LLC, you will need to obtain a license for the entity and for the broker of that entity (broker-officer, broker-partner or broker-associate). The entity application, Application for Real Estate Corporation, Partnership or Association (LLC) License, and the Application for License/Information Change form, Consent to Examine and Audit Escrow or Trust Account form, and the fictitious name registration instructions can be located on the Missouri Real Estate Commission's web site at [www.pr.mo.gov/realestate.asp](http://www.pr.mo.gov/realestate.asp) under Application Forms.

### HOW TO AVOID HAVING YOUR ENTITY APPLICATION RETURNED!

HOW TO PROPERLY COMPLETE THE APPLICATION FOR A REAL ESTATE CORPORATION, PARTNERSHIP, OR ASSOCIATION (LIMITED LIABILITY COMPANY) LICENSE:

1. **COMPANY NAME:** INDICATE THE **EXACT NAME** THAT HAS BEEN REGISTERED WITH THE MISSOURI SECRETARY OF STATE'S OFFICE. (REFER TO YOUR CERTIFICATE TO MAKE SURE YOU USE THE FULL NAME.)
2. **ADDRESS/PHONE NUMBER:** YOU MUST INDICATE THE PHYSICAL LOCATION OF THE BUSINESS. IF YOU WISH TO USE A PO BOX OR A DIFFERENT ADDRESS FOR MAILING PURPOSES, ALSO INDICATE THAT UNDER THE MAILING ADDRESS. **(WE MUST HAVE THE PHYSICAL LOCATION AND PHONE NUMBER.)**
3. **FICTITIOUS NAME:** IF DOING BUSINESS IN ANY NAME OTHER THAN THE EXACT NAME OF YOUR COMPANY, YOU MUST FILE A FICTITIOUS NAME WITH THE MISSOURI SECRETARY OF STATE'S OFFICE, AND INDICATE THE NAME IN THE SPACE PROVIDED. (NOTE: WHEN FILING A FICTITIOUS NAME FOR YOUR COMPANY, YOU MUST SHOW THAT THE COMPANY, NOT INDIVIDUALS, OWN THE NAME.) ATTACH A COPY OF THE OFFICIAL FICTITIOUS NAME REGISTRATION WITH YOUR APPLICATION.
4. **FRANCHISE AGREEMENT:** IF USING A FRANCHISE OR TRADE NAME, INCLUDE A COPY OF THE COMPLETE, SIGNED FRANCHISE OR TRADE AGREEMENT. THE FRANCHISE AGREEMENT/TRADE AGREEMENT MUST SHOW THE LEGAL NAME OF THE ENTITY AS BEING THE OWNER.
5. **SECTION II: LIST ALL MISSOURI-LICENSED MEMBERS OF AN ASSOCIATION (LLC), OFFICERS OF A CORPORATION, AND PARTNERS OF A PARTNERSHIP.** PLEASE NOTE THAT EACH BROKER-OFFICER, BROKER-ASSOCIATE, OR BROKER-PARTNER LICENSED IN MISSOURI, **INCLUDING THE DESIGNATED BROKER**, MUST RETAIN A COMPARABLE POSITION/TITLE WITHIN THE FIRM.
6. **SECTION III:** IF CONDUCTING **MISSOURI ACTIVITY IN ANY OTHER LOCATION**, THIS PORTION MUST BE COMPLETED. THE BRANCH OFFICE ADDRESS, NAME AND LICENSE NUMBER OF THE BRANCH MANAGER MUST BE PROVIDED.
7. **SECTION IV: READ CAREFULLY BEFORE ANSWERING THESE QUESTIONS.** PAY SPECIAL ATTENTION TO QUESTION #C. IF THE COMPANY HOLDS A REAL ESTATE LICENSE IN ANOTHER STATE, YOU **MUST ATTACH A LICENSE (HISTORY) CERTIFICATION** FROM THE NONRESIDENT LICENSING AUTHORITY. **(THE APPLICATION WILL BE RETURNED IF THIS IS NOT ATTACHED – A COPY OF THE LICENSE IS NOT ACCEPTABLE.)**
8. **SECTION V:** DESIGNATED BROKER MUST SIGN.
9. **ATTACH APPROPRIATE FEE.** MISSOURI: \$80.00 NONRESIDENT: \$150.00
10. **ATTACH A COPY OF THE CERTIFICATE OF INCORPORATION, ORGANIZATION, OR CERTIFICATE OF FOREIGN AUTHORITY**, DEPENDING ON WHAT TYPE OF COMPANY YOU ARE LICENSING.
11. **CONSENT TO EXAMINE AND AUDIT ESCROW OR TRUST ACCOUNT FORM MUST BE COMPLETED.**  
**IF REGISTERING AN ACCOUNT**, COMPLETE SECTION A, SIGN AND DATE. **ATTACH A COPY OF A VOIDED DEPOSIT TICKET** VERIFYING THE ACCOUNT NUMBERS.  
**IF YOU ARE NOT REGISTERING AN ACCOUNT**, COMPLETE SECTION D AND MARK THE APPROPRIATE BOX, SIGN AND DATE IN SECTION E.
12. **DON'T FORGET TO ALSO SUBMIT THE APPROPRIATE APPLICATION AND FEE FOR THE DESIGNATED BROKER OF THE COMPANY.** THE DESIGNATED BROKER MUST COMPLETE EITHER AN APPLICATION FOR LICENSE INFORMATION/CHANGE FORM OR AN APPLICATION FOR REAL ESTATE LICENSE (IF RECENTLY PASSED THE BROKER EXAM, THIS APPLICATION WAS GIVEN TO YOU AT THE TEST SITE).



STATE OF MISSOURI  
DIVISION OF PROFESSIONAL REGISTRATION  
**APPLICATION FOR A REAL ESTATE CORPORATION,  
PARTNERSHIP OR ASSOCIATION (LIMITED LIABILITY  
COMPANY) LICENSE**

MISSOURI REAL ESTATE COMMISSION  
3605 MISSOURI BLVD  
P O BOX 1339  
JEFFERSON CITY, MO 65102  
(573) 751-2628  
FAX: (573) 751-2777  
realestate@pr.mo.gov  
www.pr.mo.gov/realestate

**FOR MREC USE ONLY**

FEE

DATE ISSUED

**IMPORTANT: READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING APPLICATION.**

**FEES: \$80 MISSOURI, \$150 NONRESIDENT**

**SECTION I**

NAME OF ASSOCIATION (LIMITED LIABILITY COMPANY), CORPORATION, PARTNERSHIP		TYPE OF ENTITY (Check appropriate box)
PHYSICAL STREET ADDRESS OF PRINCIPAL PLACE OF BUSINESS FOR MISSOURI TRANSACTIONS		<input type="checkbox"/> ASSOCIATION (Limited Liability Company)
CITY STATE ZIP CODE		<input type="checkbox"/> CORPORATION
MAILING ADDRESS IF DIFFERENT THAN PHYSICAL ADDRESS (NUMBER, STREET, CITY, STATE, ZIP CODE)		<input type="checkbox"/> PARTNERSHIP
PROVIDE FICTITIOUS NAME OR TRADE NAME IF APPLICABLE (SEE #3 ON REVERSE SIDE FOR ADDITIONAL INSTRUCTIONS)		TELEPHONE NUMBER OF PRINCIPAL PLACE OF BUSINESS (Include Area Code)
NAME OF DESIGNATED BROKER	LICENSE NUMBER/SSN OF DESIGNATED BROKER	FAX NUMBER
		E-MAIL ADDRESS

**SECTION II – List all Missouri-licensed members of an association (LLC), officers of a corporation, partners of a partnership. NOTE: Each broker-officer, broker-associate, or broker-partner licensed in Missouri, including the designated broker, MUST retain a comparable position/title within the firm. Attach additional sheet, if needed.**

NAME	HOME ADDRESS (STREET, CITY, STATE, ZIP CODE)	LICENSE NUMBER

**SECTION III – If opening multiple offices, list locations of all branch offices conducting Missouri real estate activities. Attach additional sheet, if needed.**

NAME OF BRANCH MANAGER	LICENSE NUMBER	BRANCH LOCATION (STREET, CITY, STATE, ZIP CODE)	TELEPHONE NUMBER (Include Area Code)

**SECTION IV – Mark appropriate box for each question and provide explanation.**

A. Have you, the designated broker, or any other Missouri-licensed member, officer, or partner been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution under the laws of this state or any other state or of the United States, whether or not sentence was imposed? Check yes if the offense has not been previously disclosed to this Commission and provide the date, offense, court location and case number.	<input type="checkbox"/> YES <input type="checkbox"/> NO
B. Has this firm been previously licensed with the Missouri Real Estate Commission? If yes, provide approximate dates and previous license number in the boxes below.	<input type="checkbox"/> YES <input type="checkbox"/> NO
DATE	LICENSE NO.
C. Has this firm ever held a real estate license in any other state or jurisdiction? If yes, provide name of state or jurisdiction and approximate dates of licensure and attach a certification of licensure/license history from the licensing authority of the state where most recently licensed. Certification must be issued within three months of application for a Missouri license.	<input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF STATE/JURISDICTION	DATES
D. Has this firm ever had its real estate application denied, or license suspended, revoked, placed on probation, or otherwise disciplined in any other state or jurisdiction? If yes, provide a certification of licensure from the appropriate licensing authority.	<input type="checkbox"/> YES <input type="checkbox"/> NO
E. Will this entity maintain a business relationship or affiliation, whether by franchise agreement, contract or otherwise, with another organization and use the name, trade name or insignia of the other organization in any manner in real estate advertising? (If yes a signed copy of the franchise agreement or contract must be attached. The franchise agreement/trade agreement must show the legal name of the entity as being the owner)	<input type="checkbox"/> YES <input type="checkbox"/> NO

**SECTION V – Sign and date.**

I hereby attest and affirm that the information provided in this application is true and correct to the best of my knowledge and belief, and I understand that if this information is not true and correct, I am subject to the penalties of making a false affidavit.

I also certify that I am the designated broker for the entity and that I will be responsible for the real estate activities of the entity and its licensees.

SIGNATURE OF DESIGNATED BROKER

DATE

**INSTRUCTIONS:**

1. Complete Sections I thru V. **Type or print legibly with black ink only.**
2. Submit license fee of \$80.00 for firm maintaining a Missouri business address or \$150.00 if maintaining a nonresident address. Make check or money order payable to the “Missouri Real Estate Commission.” All fees are nonrefundable.
3. If doing business under any name other than the **exact** name registered with the Missouri Secretary of State’s Office, the fictitious name must be filed with the Missouri Secretary of State’s Office and a copy of the approved registration must be included with this application. If filing a fictitious name, complete the registration form showing the firm as the owner; individuals should not be listed as owners.
4. Attach completed Consent to Examine and Audit Escrow or Trust Account form. Attach a voided copy of a deposit ticket or bank statement for each escrow account. If not maintaining an account, complete sections D and E. Note: Do not register operating accounts.
5. **Mail the application to:** Missouri Real Estate Commission, P.O. Box 1339, Jefferson City, MO 65102. **Hand delivery or express delivery service:** Missouri Real Estate Commission, 3605 Missouri Blvd., Jefferson City, MO 65109.
6. Licenses will be mailed to the brokerage approximately 2-3 weeks after the properly completed applications and fees are received by this office. To request a temporary work permit, enclose a stamped envelope addressed to the brokerage.
7. **ASSOCIATIONS (LIMITED LIABILITY COMPANIES)** – In addition to completing Sections I thru V, attach the following:
  - a. **Missouri LLC** – A copy of the Certificate of Organization received from the Missouri Secretary of State’s Office; or
  - b. **Non-resident LLC** (those organized outside Missouri) –
    1. Attach a copy of the Certificate of Organization filed in resident state; and
    2. Attach a copy of the Certificate of Registration of Foreign Limited Liability Company received from the Missouri Secretary of State’s Office.
8. **CORPORATIONS** – In addition to completing Sections I thru V of this form, attach the following documentation:
  - a. **Missouri Corporation** – A copy of the Certificate of Incorporation received from the Missouri Secretary of State’s Office; or
  - b. **Non-resident Corporation** (those incorporated outside Missouri) –
    1. Attach a copy of the Certificate of Incorporation filed in resident state; and
    2. Attach a copy of the Certificate of Foreign Authority received from the Missouri Secretary of State’s Office.
9. **PARTNERSHIPS** – In addition to completing Sections I thru V, attach a copy of the approved fictitious name registration received from the Missouri Secretary of State’s Office.

If forming a Limited Liability Partnership, attach a copy of the certificate of registration from the Missouri Secretary of State’s Office, and a copy of the approved fictitious name registration if using a name other than the name on the certificate of registration.



STATE OF MISSOURI  
DIVISION OF PROFESSIONAL REGISTRATION  
MISSOURI REAL ESTATE COMMISSION  
**APPLICATION FOR LICENSE/  
INFORMATION CHANGE**

3605 MISSOURI BOULEVARD  
P.O. BOX 1339  
JEFFERSON CITY, MISSOURI 65102  
TELEPHONE (573) 751-2628  
FAX (573) 751-2777  
realestate@pr.mo.gov  
www.pr.mo.gov/realestate.asp

**FOR MREC USE ONLY**

TYPE OF LICENSE		BRO	BRA	BRP
SAL	BRK	IAS	PCB	PCS
BRS	INB			
NEW BROKER NAME				
DATE		FEE		

**SECTION 1A ALL APPLICANTS MUST COMPLETE THIS SECTION**

NAME OF APPLICANT		LICENSE NUMBER OR SSN	
RESIDENCE ADDRESS (NUMBER, STREET, PO BOX, CITY, STATE, ZIP CODE)			
HOME PHONE (INCLUDE AREA CODE)	CELL PHONE (INCLUDE AREA CODE)	PERSONAL EMAIL ADDRESS	

**SECTION 1B ALL APPLICANTS MUST ANSWER THE FOLLOWING QUESTIONS, SIGN & DATE. IF YES, EXPLAIN ON A SEPARATE SHEET.**

A. Have you been finally adjudicated and found guilty, or entered a plea of guilty or nolo contendere, in a criminal prosecution in this state, or any other state, or of the United States, whether or not sentence was imposed? **NOTE: This includes Suspended Imposition of Sentence, Suspended Execution of Sentence, misdemeanor and felony convictions, and alcohol related offenses, i.e. DWI and BAC. Check yes if NOT previously disclosed to this Commission** and provide the date of the conviction and/or pleading, nature of the offense, court location, and case number on a separate sheet.

☐ YES ☐ NO

B. Have you ever had a real estate application denied or your real estate license suspended, revoked, placed on probation, or otherwise disciplined in Missouri or any other state or jurisdiction? **Check yes if NOT previously disclosed to this Commission** and provide name of state or jurisdiction, reason for denial or discipline and approximate dates on a separate sheet.

☐ YES ☐ NO

I hereby authorize the Missouri Real Estate Commission, to release and/or discuss information contained in my application with the Designated Broker and/or the brokers that have provided their signature(s) in Sections 2A and 2B

SIGNATURE OF APPLICANT	DATE
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**SECTION 1C INDICATE CHANGE BEING REQUESTED AND SUBMIT APPLICABLE FEE. THE NUMBERED ITEMS IN THIS SECTION CORRESPOND WITH THE NUMBERED INSTRUCTIONS ON THE REVERSE SIDE.**

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|---|--|
| <p>1. <input type="checkbox"/> Transfer Salesperson or Broker-Salesperson license to another Broker. Fee: \$50.00</p> <p>2. <input type="checkbox"/> Place license on inactive status. Fee: \$50.00</p> <p>3. <input type="checkbox"/> Reactivate Salesperson license. Fee: \$50.00</p> <p>4. <input type="checkbox"/> Change status to Broker-Salesperson. Fee: \$50.00</p> <p>5. <input type="checkbox"/> Change status to Individual Broker. (Section 2B <u>must</u> be completed.) Fee: \$50.00</p> <p>6. <input type="checkbox"/> Change status to or transfer. Fee: \$50.00<br/><input type="checkbox"/> Broker-Officer <input type="checkbox"/> Broker-Associate <input type="checkbox"/> Broker-Partner<br/><b>NOTE: Each broker-officer, broker-associate, or broker-partner licensed in Missouri MUST retain a comparable position/title within the firm.</b></p> <p>7. <input type="checkbox"/> Obtain additional license. Fee: \$50.00<br/><input type="checkbox"/> Broker <input type="checkbox"/> Broker-Officer <input type="checkbox"/> Broker-Associate <input type="checkbox"/> Broker-Partner<br/><b>NOTE: Each broker-officer, broker-associate, or broker-partner licensed in Missouri MUST retain a comparable position/title within the firm.</b></p> <p>8. <input type="checkbox"/> Change of status from: Fee: \$50.00<br/><input type="checkbox"/> Professional Corporation Salesperson to Salesperson<br/><input type="checkbox"/> Professional Corporation Broker-Salesperson license to Broker-Salesperson</p> <p>9. <input type="checkbox"/> Replace lost, stolen or destroyed license. Complete Section 1A, 1C and 2B. Fee: \$25.00</p> <p>10. <input type="checkbox"/> Remove licensee from Broker's or entity's affiliation. No fee required. Complete Section 1A, 1C and 2A.</p> <p>11. <input type="checkbox"/> Reinstatement of Suspended License. Fee: \$50.00</p> | <p>12. <input type="checkbox"/> Change name of Corporation, Partnership or Association. Resident fee \$80.00; Nonresident fee \$150.00. Complete Section 1A with former name and Section 2B with new name.</p> <p>13. <input type="checkbox"/> Change, add or cancel fictitious name or trade name. Provide name and mark appropriate box below. Attach copy of approved registration from the Secretary of State's office. If using trade name, attach copy of complete signed agreement.</p> <p>_____</p> <p><input type="checkbox"/> New <input type="checkbox"/> Additional <input type="checkbox"/> Cancel <input type="checkbox"/> Replacing _____</p> <p>14. <input type="checkbox"/> Branch office notification. Sections 1C and 2B must be completed by the broker or designated broker. Mark appropriate box and provide the following:</p> <p><input type="checkbox"/> New/additional branch office <input type="checkbox"/> Change in branch office<br/><input type="checkbox"/> Closing branch office <input type="checkbox"/> Change in branch manager</p> |
|---|--|

BRANCH OFFICE MANAGER	LICENSE NO.
BRANCH OFFICE LOCATION	
PHONE NUMBER	FORMER BRANCH MANAGER (IF APPLICABLE)
FORMER BRANCH LOCATION (IF APPLICABLE)	

SECTION 2A	SIGNATURE OF FORMER BROKER	FORMER BROKER NAME, PRINTED OR TYPED	DATE
	NAME OF FORMER BROKER/ENTITY		BUSINESS PHONE (INCLUDE AREA CODE)
SECTION 2B	SIGNATURE OF NEW BROKER	NEW BROKER NAME, PRINTED OR TYPED	DATE
	NAME OF NEW CORPORATION/PARTNERSHIP/ASSOCIATION/BROKER (DO NOT USE DBA/FICTITIOUS NAMES)		MO BROKER/ENTITY LICENSE NO., IF APPLICABLE
	BUSINESS ADDRESS (MAIN OFFICE ONLY) (NUMBER, STREET, CITY, STATE, ZIP CODE)		BUSINESS PHONE (INCLUDE AREA CODE)
	BROKER'S E-MAIL ADDRESS (IN CASE OF TRANSFER APPLICATION REJECTION, BROKER'S E-MAIL ADDRESS IS REQUIRED SO THAT IMMEDIATE NOTIFICATION CAN BE PROVIDED.)		

## GENERAL INSTRUCTIONS

- A. Type or print LEGIBLY. Use black ink. INCOMPLETE APPLICATIONS WILL BE RETURNED FOR CORRECTION.
- B. When a fee is required, the amount is indicated. Make check or money order payable to the "Missouri Real Estate Commission." **All fees are nonrefundable.**
- C. Attach license when applicable. If the license has been lost, stolen or destroyed, the current broker must attach a signed explanation.
- D. Any applicant reactivating an inactive license or a license that has been noncurrent for over six months must attach a copy of the 24-hour Missouri Real Estate Practice (MREP) course completion certificate showing proof of course completion within six months of application to reactivate.
- E. Mail the application to: Missouri Real Estate Commission, P.O. Box 1339, Jefferson City, MO 65102. Hand delivery or express delivery service: Missouri Real Estate Commission, 3605 Missouri Blvd., Jefferson City, MO 65109.
- F. The new license will be mailed to the brokerage approximately 2 - 3 weeks after the properly completed application is received by the Commission. To expedite and request a temporary work permit, enclose a stamped envelope addressed to the brokerage.

**Additional information on specific changes is provided below. The numbered instructions in this section correspond with the numbered items on the reverse side.**

- 1. **TRANSFER SALESPERSON OR BROKER-SALESPERSON LICENSE TO ANOTHER BROKER:** Complete Section 1A, 1B and 1C. The current broker must complete Section 2A and attach the applicant's license. The current broker's signature is not required if the applicant's license has been previously returned to the Commission. The new broker must complete Section 2B. Refer to 20 CSR 2250-4.050(4).
- 2. **PLACE LICENSE ON INACTIVE STATUS:** Complete Section 1A, 1B and 1C. The current broker must complete Section 2A and attach applicant's license. A closing form must be submitted with this application if the applicant holds a broker license or the applicant is the only licensed broker-officer, broker-partner or broker-associate of a corporation, partnership or association. **NOTE: Before an inactive license may be reactivated, the 24-hour Missouri Real Estate Practice (MREP) course must be completed.**
- 3. **REACTIVATE SALESPERSON LICENSE:** Complete Section 1A, 1B and 1C. If applicable, attach inactive license, and completion certificate showing proof of completion of the 24-hour Missouri Real Estate Practice (MREP) course within six months of application to reactivate license. Section 2B must be completed by the new broker.
- 4. **CHANGE STATUS TO BROKER-SALESPERSON:** Complete Section 1A, 1B and 1C. The current broker must complete Section 2A and attach applicant's license. If inactive, attach inactive license and refer to D of the general instructions. The new broker must complete Section 2B. A closing form must be submitted with this application if the applicant holds a broker license or the applicant is the only licensed broker-officer, broker-partner or broker-associate of a corporation, partnership, or association.
- 5. **CHANGE STATUS TO INDIVIDUAL BROKER:** Complete Section 1A, 1B, 1C and 2B. The current broker must complete Section 2A and attach applicant's license. If inactive, attach inactive license and refer to D of the general instructions. Attach Consent to Examine and Audit Escrow or Trust Account form, and complete Section D if not maintaining an account. If using a fictitious name, complete #13 in Section 1C and refer to #13 below. A closing form must be submitted with this application if the applicant is the only licensed broker-officer, broker-partner or broker-associate of a corporation, partnership, or association.
- 6. **CHANGE STATUS TO OR TRANSFER BROKER-OFFICER, BROKER-PARTNER OR BROKER-ASSOCIATE LICENSE:** Complete Section 1A, 1B and 1C. The current broker must complete Section 2A and attach applicant's license. The designated broker must complete Section 2B. A closing form must be submitted with this application if the applicant holds a broker license or the applicant is the only licensed broker-officer, broker-partner or broker-associate of a corporation, partnership or association (LLC). If applicant will be the designated broker of the firm, attach a Change in Designated Broker form. If inactive, attach inactive license and refer to D of the general instructions.
- 7. **OBTAIN ADDITIONAL BROKER, BROKER-OFFICER, BROKER-PARTNER OR BROKER-ASSOCIATE LICENSE:** Complete Section 1A, 1B, 1C and 2B. If adding a broker-officer or broker-associate to a corporation or association (LLC), the designated broker must complete Section 2B. If becoming the designated broker, attach a Change in Designated Broker form. If becoming a broker, attach Consent to Examine and Audit Escrow or Trust Account form and complete Section D if not maintaining an account.
- 8. **CHANGE IN STATUS FROM PROFESSIONAL CORPORATION SALESPERSON TO SALESPERSON OR PROFESSIONAL CORPORATION BROKER-SALESPERSON TO BROKER-SALESPERSON:** Complete Section 1A, 1B and 1C. The current broker must complete Section 2A and attach the applicant's license. The current broker's signature is not required if the applicant's license has been previously returned to the Commission. The new broker must complete Section 2B. Refer to 20 CSR 2250-4.075(7) and 20 CSR 2250-4.050(4).
- 9. **REPLACE LOST, STOLEN OR DESTROYED LICENSE:** Complete Section 1A and 1C. Broker must complete Section 2B.
- 10. **REMOVE LICENSEE FROM BROKER'S OR ENTITY'S AFFILIATION:** Attach license. Complete Section 1A, 1C and 2A. No fee required.
- 11. **REINSTATEMENT OF SUSPENDED LICENSE:** Complete Section 1A, 1B, and 1C. Broker must complete Section 2B. If applicable, attach copy of Certificate of Tax Compliance.
- 12. **CHANGE NAME OF CORPORATION, PARTNERSHIP OR ASSOCIATION:** Complete Section 1A with former name. Attach entity license. Designated broker must complete Section 2B with new name and address. If a corporation, attach approved copy of Certificate of Amended Name Change. If a partnership, attach approved copy of Fictitious Name Registration. If an association (Limited Liability Company), attach approved copy of Amendment of Articles of Organization.
- 13. **CHANGE, ADD, CANCEL OR REPLACE FICTITIOUS NAME OR TRADE NAME:** Complete Section 1A and 1C. Submit a copy of the Fictitious Name Registration which has been approved by the Missouri Secretary of State's Office. Include a signed copy of the new/amended franchise agreement or trade agreement, if applicable. Section 2B must be completed by the broker or designated broker.



**STATE OF MISSOURI**

DIVISION OF PROFESSIONAL REGISTRATION

**CONSENT TO EXAMINE AND AUDIT ESCROW OR TRUST ACCOUNT**

MISSOURI REAL ESTATE COMMISSION  
 3605 MISSOURI BOULEVARD  
 P.O. BOX 1339  
 JEFFERSON CITY, MO 65102  
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[www.pr.mo.gov/realestate.asp](http://www.pr.mo.gov/realestate.asp)

**339.105, RSMo requires that all funds belonging to others and held by the broker must be maintained in an escrow or trust account, registered on a consent form. Do not register brokerage operating accounts.**

**This section must be completed by Individual Broker or Designated Broker of Corporation, Association (LLC) or Partnership.**

NAME OF CORPORATION, ASSOCIATION (LLC), PARTNERSHIP, OR INDIVIDUAL BROKER		LICENSE NUMBER OR SOCIAL SECURITY NUMBER
ADDRESS OF PRINCIPAL PLACE OF BUSINESS (INCLUDE NUMBER, STREET, CITY, STATE, ZIP CODE)		
MAILING ADDRESS IF DIFFERENT THAN PRINCIPAL PLACE OF BUSINESS (STREET, PO BOX, CITY, STATE, ZIP CODE)		BUSINESS TELEPHONE NUMBER (INCLUDE AREA CODE)

**A. NEW ACCOUNT(S) - Fully complete this section and sign in Section E. IDENTIFY THE ACCOUNT NUMBER AS SHOWN ON THE BANK STATEMENT. DO NOT INCLUDE BANK ROUTING NUMBER, CHECK NUMBER, OR THE DEPOSIT NUMBER.**

1. NAME OF FINANCIAL INSTITUTION	CITY AND STATE	ACCOUNT NUMBER *	TYPE OF ACCOUNT <input type="checkbox"/> SALES ESCROW <input type="checkbox"/> PROPERTY MGMT <input type="checkbox"/> OTHER _____
2. NAME OF FINANCIAL INSTITUTION	CITY AND STATE	ACCOUNT NUMBER *	TYPE OF ACCOUNT <input type="checkbox"/> SALES ESCROW <input type="checkbox"/> PROPERTY MGMT <input type="checkbox"/> OTHER _____
3. NAME OF FINANCIAL INSTITUTION	CITY AND STATE	ACCOUNT NUMBER *	TYPE OF ACCOUNT <input type="checkbox"/> SALES ESCROW <input type="checkbox"/> PROPERTY MGMT <input type="checkbox"/> OTHER _____

**B. CHANGE IN BANK NAME OR ACCOUNT NUMBER - Fully complete this section and sign in Section E. IDENTIFY THE ACCOUNT NUMBER AS SHOWN ON THE BANK STATEMENT. DO NOT INCLUDE BANK ROUTING NUMBER, CHECK NUMBER, OR THE DEPOSIT NUMBER.**

FROM: NAME OF FINANCIAL INSTITUTION	CITY AND STATE	ACCOUNT NUMBER *	TYPE OF ACCOUNT <input type="checkbox"/> SALES ESCROW <input type="checkbox"/> PROPERTY MGMT <input type="checkbox"/> OTHER _____
TO: NAME OF FINANCIAL INSTITUTION	CITY AND STATE	ACCOUNT NUMBER *	TYPE OF ACCOUNT <input type="checkbox"/> SALES ESCROW <input type="checkbox"/> PROPERTY MGMT <input type="checkbox"/> OTHER _____

**C. ACCOUNT(S) CLOSED - If closing an escrow account and other existing escrow accounts will remain open, complete this section, and sign in Section E. If closing ALL escrow accounts and license status remains the same, complete this section as well as Section D, and sign in Section E.**

1. NAME OF FINANCIAL INSTITUTION	ACCOUNT NUMBER *	DATE CLOSED
2. NAME OF FINANCIAL INSTITUTION	ACCOUNT NUMBER *	DATE CLOSED
3. NAME OF FINANCIAL INSTITUTION	ACCOUNT NUMBER *	DATE CLOSED

I hereby authorize the designated financial institution(s) to allow a representative of the Missouri Real Estate Commission to examine and audit the account(s) mentioned above and to disclose to its representatives the originals or copies of the following records: Bank Statements, Deposit Tickets, Deposit Items, Credit and/or Debit Memos, Signature Card, and/or Cancelled Checks.

**D. This section is to be completed only if broker or entity will not be maintaining an escrow account - one box must be checked.**

**I do not maintain an escrow account for the following reason:**

- ☐ All monies will be held by a title company, escrow company, or attorney.
- ☐ I will not sell, buy, exchange, rent, lease, or manage residential or commercial property not my own.

I hereby acknowledge that all funds not my own coming into my possession are required, as provided in 339.105, RSMo, 20 CSR 2250-8.120, and 20 CSR 2250-8.220, to be deposited in an escrow or trust account. I hereby certify that I will not handle any money or funds for others in any real estate transaction. In the event I possess funds of another I will deposit these funds with a title company, escrow company, or attorney or I will immediately open and register an escrow account with the Commission.

**E. Signature of Individual Broker or Designated Broker of Corporation, Association (LLC) or Partnership Required.**

SIGNATURE OF BROKER	DATE	PRINT OR TYPE BROKER'S NAME
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